

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 29, 2002 8:00 am
Secretary of State

04-29-2002 90014 001 ****61.25

DOCUMENT # 734390

1. Entity Name

ST. PETERSBURG INTERNATIONAL FOLK FAIR SOCIETY, INC.

Principal Place of Business

Mailing Address

330 FIFTH ST N
 ST. PETERSBURG FL 33701

330 FIFTH ST N
 SAINT PETERSBURG FL 33701

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1674088

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HASKEL, LOUIS
415 SOUTH SAN REMO AVENUE
S210
CLEARWATER FL 34616

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	☐ Delete
NAME	SANTOS, ANNA	
STREET ADDRESS	3768 103RD AVE N	
CITY-ST-ZIP	CLEARWATER FL 33762	
TITLE	D	☒ Delete
NAME	MOFFETT, OLIVE	
STREET ADDRESS	1511 ALCAZAR WAY SOUTH	
CITY-ST-ZIP	SAINT PETERSBURG FL 33705	
TITLE	T	☐ Delete
NAME	YOUSEFIANI, ABBAS	
STREET ADDRESS	6912 CIRCLE CREEK DR	
CITY-ST-ZIP	PINELLAS PARK FL 33781	
TITLE	P	☐ Delete
NAME	BISHARA, MACARI	
STREET ADDRESS	2040 GULF BLVD	
CITY-ST-ZIP	BOYNTON BEACH FL 33786	
TITLE	SD	☐ Delete
NAME	PORTER, CLIVE	
STREET ADDRESS	2797 CASILLA WAY SOUTH	
CITY-ST-ZIP	SAINT PETERSBURG FL 33712	
TITLE	D	☐ Delete
NAME	EVANS, MOSES	
STREET ADDRESS	6013 113TH ST, APT 605	
CITY-ST-ZIP	SEMINOLE FL 33762	

TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☒ Addition
NAME	DIRECTOR
STREET ADDRESS	BOB DOBBS
CITY-ST-ZIP	1144 BRISTOL COURT ST. PETERSBURG, FL 33709
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Abbas Yousefiani **ABDAS YOUSEFIANI** 4/14/2002

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)